

# FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	3761
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b> 450.00	Attorney Docket No.	01313/100E290-US2

<b>METHOD OF PAYMENT</b> (check all that apply)	<b>FEE CALCULATION</b> (continued)
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<input checked="" type="checkbox"/> X	Check	<input type="checkbox"/>	Credit Card	<input type="checkbox"/>	Money Order
<input type="checkbox"/>	Deposit Account	<input type="checkbox"/>	None		
Deposit Account Number	<input type="text" value="04-0100"/>				
Deposit Account Name	<input type="text" value="Darby &amp; Darby P.C."/>				

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below

☐ Charge fee(s) indicated below, **except for the filing fee**

☐ Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17

☒ X Credit any overpayments


To the above-identified deposit account.

☐ Other (please identify): \_\_\_\_\_

FEE CALCULATION			
1. BASIC FILING FEE			
<u>Fee Description</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee Paid (\$)</u>
Utility Filing Fee	790	395	_____
Design Filing Fee	350	175	_____
Plant Filing Fee	550	275	_____
Reissue Filing Fee	790	395	_____
Provisional Filing Fee	160	80	_____
<b>Subtotal (1) \$</b>			<b>0.00</b>

FEE CALCULATION (continued)			
<b>2. EXTRA CLAIM FEES</b>			
<u>Fee Description</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>
Each claim over 20	18		9
Each independent claim over 3	88		44
Multiple dependent claims	300		150
For Reissues, each claim over 20 and more than in the original patent	18		9
For Reissues, each independent claim more than in the original patent	88		44
<b><u>Total Claims</u></b>	<b><u>Extra Claims</u></b>	<b><u>Fee (\$)</u></b>	<b><u>Fee Paid (\$)</u></b>
- 20 or HP =	x	=	
HP= highest number of total claims paid for, if greater than 20			
<b><u>Indep. Claims</u></b>	<b><u>Extra Claims</u></b>	<b><u>Fee (\$)</u></b>	<b><u>Fee Paid (\$)</u></b>
- 3 or HP =	x	=	
HP= highest number of independent claims paid for, if greater than 3			
<b>Multiple Dependent Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	
<b>Subtotal (2) \$</b>			<b>0.00</b>

3. OTHER FEES		Small Entity	
Fee Description	Fee (\$)	Fee (\$)	Fee Paid
1-month extension of time	110	55	110.00
2-month extension of time	430	215	
3-month extension of time	980	490	
4-month extension of time	1,530	765	
5-month extension of time	2,080	1,040	
Information disclosure stmt. Fee	180	180	
37 CFR 1.17(q) processing fee	50	50	
Non-English specification	130	130	
Notice of Appeal	340	170	
Filing a brief in support of appeal	340	170	340.00
Request for oral hearing	300	150	
Other:			
		<b>Subtotal (3) \$</b>	<b>450.00</b>

SUBMITTED BY					
Signature			Registration No. (Attorney/Agent)	51,932	Telephone (212) 527-7735
Name (Print/Type)	Sandra S. Lee			Date	December 7, 2004

Express Mail Label No. \_\_\_\_\_ Dated: \_\_\_\_\_

Attorney Docket No.: 01313/100E290-US2

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Date

A. Santini

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J. Stantini

Typed or printed name of person signing Certificate

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Fee Transmittal (1 page);  
One Month Request for Extension of Time Under 37 CFR 1.136(a) (1  
page);  
Appeal Brief (18 pages) – in triplicate;  
Check in the amount of \$450.00 (Check No. **6942**); and  
Return postcard.